FORM D

SEC Mall Processing Section

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Washington, DO

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

14	34	14	05					
OMB APPROVAL								
OMB Num	ber:	32	235-0076					
Expires:	April	30,	2008					
Expires: April 30,2008 Estimated average burden								
hours per response16.00								

SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 46 Type of Filing: New Filing Amendment	(6) ULOE
A. BASIC IDENTIFICATION DATA	[100 U 200 F 100 U 200 F 100 U 200 F 100 U 200 U
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Southwest Fuller Project, LLC	08049842
Address of Executive Offices (Number and Street, City, State, Zip Code) 11615 Angus Rd., Ste. 203 Austin, Texas 78759	Telephone Number (Including Area Code) 512/249-5552
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Energy exploration	
	(please specify): PROCESSED ability company MAY 0 6 2008

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

	· · · · · ·		<u></u>			<u> </u>				
					ENTII	FICATION DATA				
2. Enter the information	-			~						
				as been organized w						a e e e e e e e e e e e e e e e e e e e
										s of equity securities of the issuer
 Each executive o 	fficer a	nd director of	of corp	orate issuers and of	corpo	rate general and mar	naging	partners of	f partne	ership issuers; and
 Each general and 	manag	ing partner	of part	nership issuers.						
Check Box(es) that Apply:	Ø	Promoter	Ø	Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first Carey, Michael Douglas		vidual)				· · · · · ·				
Business or Residence Add 11615 Angus Rd., Ste.		Number and	Street	, City, State, Zip Co Austin, Texas 7						
Check Box(es) that Apply:	Z	Promoter	Ø	Beneficial Owner	7	Executive Officer	Z	Director	Ø	General and/or Managing Partner
Full Name (Last name first, Hudson, Ryan Charles	, if indi	vidual)			_				•	
Business or Residence Add 11615 Angus Rd., Ste. 2	•	Number and	Street	, City, State, Zip Co Austin, Texas 78						
Check Box(es) that Apply:	1	Promoter	Z	Beneficial Owner	Ź	Executive Officer	Z	Director		General and/or Managing Partner
Full Name (Last name first, Tyson, Jeffrey Scott	if indi	vidual)								
Business or Residence Add 11615 Angus Rd., Ste. 2		Number and	Street	, City, State, Zip Co Austin, Texas 78						
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)								
Business or Residence Add	ress (Number and	Street	, City, State, Zip Co	odc)				·	
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)								
Business or Residence Add	ress (Number and	Street	, City, State, Zip Co	ode)					
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director	- 🗆	General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)	• • • •				·····			
Business or Residence Add	ress (Number and	Street	, City, State, Zip Co	ode)					
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	if indi	vidual)								

Business or Residence Address (Number and Street, City, State, Zip Code)

				•	B. II	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sol	d, or does th			ll, to non-a						Yes	No E
2.	What is	the minin	ıum investn	nent that w	vill be acce	pted from a	any individ	lual?		,		s_4,0	00.00
3. 4.	Enter tl	he informa	permit join tion request	ed for eac	h person v	vho has bee	en or will b	e paid or	given, dire	ctly or ind	irectly, any	Yes	No
	If a pers	son to be list, list the n	sted is an ass ame of the b , you may s	sociated po roker or d	erson or age calor. If me	ent of a brok ore than five	cer or deale c (5) persoi	r registere ns to be list	d with the S cd are asso	SEC and/or	with a state		
Ful N/		Last name	first, if ind	ividual)		•							
Bus	siness or	Residence	Address (N	umber and	d Street, C	ity, State, 2	ip Code)	<u>.</u>			 · ·		
Nai	me of As	sociated B	roker or De	aler									
Sta	tes in Wi	nich Persor	n Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check "All States" or check individual States)										All States		
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)						· · · · · · · · · · · · · · · · · · ·			
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nar	me of As	sociated B	roker or De	aler									
Sta			Listed Has										
	(Check	"All State:	s" or check	individual	States)	•••••	•••••••••••••	•••••				☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Ful	l Name (Last name	first, if indi	vidual)								•	
Bus	siness or	Residence	: Address (1	Number an	d Street, C	ity, State,	Zip Code)			<u></u>			
Nar	ne of As	sociated Bi	roker or De	aler									
Stat	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers		,				
	(Check	"All States	s" or check	individual	States)			••••	***************************************			☐ AI	States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Aiready Sold
	Type of Security	Offering Trice	3014
	Debt		
	Equity	S	s
	Common Preferred		
	Convertible Securities (including warrants)	5	\$
	Partnership Interests		
	Other (Specify LLC interests	354,000.00	\$_354,000.00
	Total	354,000.00	§ 354,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
			\$ 354,000.00
	Accredited Investors		\$_004,000.00
	Non-accredited Investors		3
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		s
	Rule 504		\$
	Total		\$ <u>0.00</u>
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s
	Printing and Engraving Costs	7	\$_3,000.00
	Legal Fees	.	\$_5,000.00
	Accounting Fccs	-	\$ 3,000.00
	Engineering Fees		\$ 2,000.00
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify) Travel, marketing expenses		\$
	Total	_	\$ 13,000.00

	C. OFFERING PRICE, NUMBE	R OF INVE	STORS, EXPENSES A	ND USE OF PI	ROCEEDS		
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Que proceeds to the issuer."	uestion 4.a.	This difference is the "a	adjusted gross		s34	1,000.00
5.	Indicate below the amount of the adjusted gross proceeds of the purposes shown. If the amount for any check the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is n ne payments	ot known, furnish an listed must equal the a	estimate and			
					Payments to Officers, Directors, & Affiliates		yments to Others
	Salaries and fees] \$. 🗆 s _	
	Purchase of real estate] \$	_ s _	
	Purchase, rental or leasing and installation of machi	nery	***************************************] \$		
	Construction or leasing of plant buildings and facili	tics] \$. 🗆 s _	
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securitie	s of another	[] \$	_ [] \$	
	Repayment of indebtedness	***************************************] \$. 🗆 \$	
	Working capital						
	Other (specify): AFE] \$	∠ \$	267,000.00
	Leasehold Turnkey Agreement] \$	Z \$_	74,000.00
	Column Totals						
	Total Payments Listed (column totals added)					41,000.0	
		D. FEDER	AL SIGNATURE				
sig	e issuer has duly caused this notice to be signed by the un nature constitutes an undertaking by the issuer to furni- information furnished by the issuer to any non-accrec	sh to the U.S	. Securities and Exch	ange Commiss	ion, upon writte	ile 505, t en reques	he following st of its staff,
SS	uer (Print or Type)	Signature	0/	D	ate 1	<u></u>	
S	outhwest Fuller Project, LLC		X		1/30	<i>Y</i>	
Na	me of Signer (Print or Type)	Title of Sign	er (Frint of Type)		,—-		
uc	son Sutherland						

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE									
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No K						
	See Appendix, Column 5, for state response.								

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Southwest Fuller Project, LLC		YHAV
Name (Print or Type)	Title (Print or Type)	
Judson Sutherland	ATA	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 I 3 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell Type of investor and explanation of to non-accredited offering price waiver granted) offered in state amount purchased in State investors in State (Part E-Item 1) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Investors **Investors** Amount Yes No Yes No Amount State ΑL ΑK ΑZ AR CA CO CT LLC interests X 1 \$3,000.00 × DE ¢3 NAN DC LLC interests × × 1 \$12,000.00 FL £40 000 GA HI ID LLC interests 1 \$3,000.00 × IL × \$3,000 INIA KS KY LA ME MD MA МІ MN M\$

APPENDIX 2 4 5 ı 3 Disqualification under State ULOE Type of security (if yes, attach Intend to sell and aggregate Type of investor and explanation of offering price to non-accredited waiver granted) offered in state amount purchased in State investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited No Investors **Investors** Yes State Yes No Amount Amount MO MT NE NV NH NJ NM NY NC ND LLC interests 2 \$6,000.00 X OH X \$6.000 OK OR LLC interests PA 1 \$6,000.00 X × \$6,000 RΙ SC SD TN LLC interests 26 TX × \$324,000.0 × \$324,000 UT VT VAWA wv WI

	ÁPPENDIX											
I		2	3		4							
	Intend to sell and aggregate offering price investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)							
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
WY												
PR												

